

Work Order ID 115055

Monday, March 17, 2014 2:39:42 PM

646.3719

115055

Page 1

Item ID: 646.3719

Revision ID:

Item Name: Doubler

Start Date: 3/17/14

Start Qty: 10.00

10

Required Date: 3/17/14

Req'd Qty: 10.00

10

Reference:

N900040100

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Customer:

Approvals:

Process Plan: ML3

Date: 14-03-18

Tooling:

Date: _____

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Run Start *NR1*

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
646.3700	A								

110

0.00

110

Waterjet

FLOW CNC Waterjet

6061-063"

Memo

1-Cut as per Dwg

Dwg Rev: A

Prog Rev: A

2-Deburr if necessary

0.00

13

mm/DL 14.05.08

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Quality Control

Memo

0.00

13

mm/DL 14.05.08

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 115055

Monday, March 17, 2014 2:39:42 PM

115055

Page 2

Item ID: 646.3719

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Doubler

Start Date: 3/17/14

Start Qty: 10.00

10

Cust Item ID:

Required Date: 3/17/14

Req'd Qty: 10.00

10

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start ***NR1***

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

QC8- Inspect parts - second check

0.00

DAS

27

389

130

QC

Memo

0.00

M/S/8

Quality Control

13

140

Outsource process-Anodize per QSI017 4.1.10.1

0.00

140

Outsource4

Memo

0.00

Issue P/O to ATG :

24140

Outsource process - Anodize

1- Black Anodize as per Dwg 646.3700

2- PRIME AS PER DWG, SEE NOTE #2

Certification of Conformity is required

CX 14105/09 13

150

Receive & Inspect for Damage & Mat'l Certs

0.00

150

Packaging

Memo

0.00

Packaging

P4/10/20 (13)

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											

FAULT CATEGORY			
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 115055

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115055

Page 3

Item ID: 646.3719 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Doubler
Start Date: 3/17/14 Start Qty: 10.00 ***10*** Cust Item ID:
Required Date: 3/17/14 Req'd Qty: 10.00 ***10*** Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160 *160* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00 0.00 DAS 27 9-89 4/5/21				13			
190 *190* Packaging Packaging	Identify as per dwg & Stock Location: <u>ST524</u> Memo ***IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND REV***	0.00 0.00				13x		DAS 28 9-89 MAY 21 2014	
200 *200* QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00 0.00							14/5/21 MF 4-5-21

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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Picklist Print

Monday, March 17, 2014 2:39:42 PM

Page 1

Work Order ID: 115055

115055

Parent Item: 646.3719

646 3719

Parent Item Name: Doubler

Start Date: 3/17/14

Required Date: 3/17/14

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP REV:A 12.10.22 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6S.063		Purchased		No		110	sf	394.2680	0.02778	0.292421			

M6061T6S 063

6061-T6 .063 Sheet

mm 14/05/08

Location

Loc Qty

Loc Code

MAT021

394.268

M124446

9

M126075

4.5

M127006

9

M127420

186.62

M128054

185.148

0.47

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		
<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

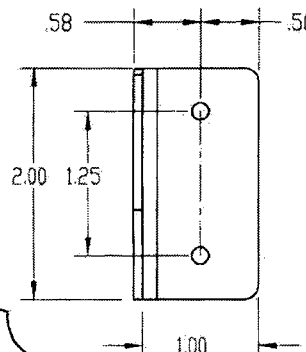
APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 03702				SHEET 1 OF 2	
	DWG NO. 646.3700	REV: A	PREPARED BY B. PETERS	DATE: 11/15/12	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.	
	DWG TITLE: SHEETMETAL					
	APPROVED BY: ENGR. <i>[Signature]</i>	MFG. <i>[Signature]</i>	QC <i>[Signature]</i>	EFFECT NEXT ORDER		
TRANSACTION CODES (TC) A-ADD C-CREATE R-REVISE D-DELETE	REASON: ADDED ALTERNATE MATERIAL AND REVISED REFERENCE DIMENSIONS				EOR: D-12-010	

SHEET 1, ZONE A2 IS:

IS

△ PRIMARY MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
ALTERNATE MATERIAL: SS 17-4 PH PER AMS 5604

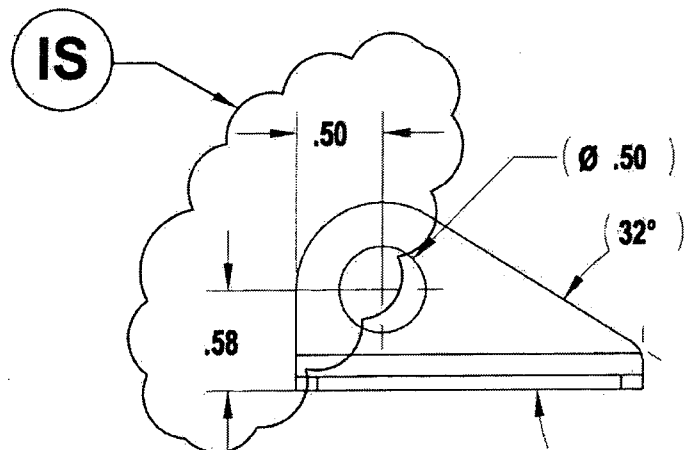
IS



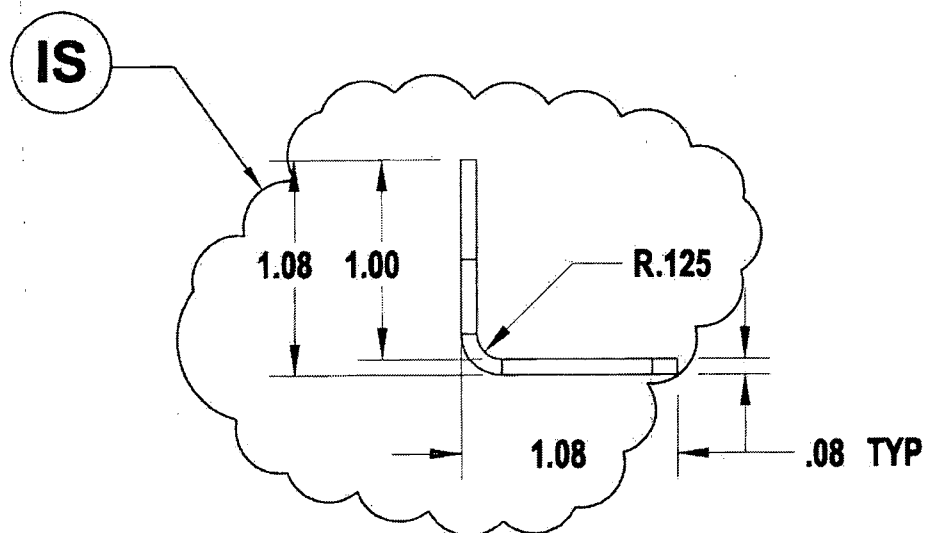
SHEET 7, ZONE B1 IS:

11.50.55 465
1403-18

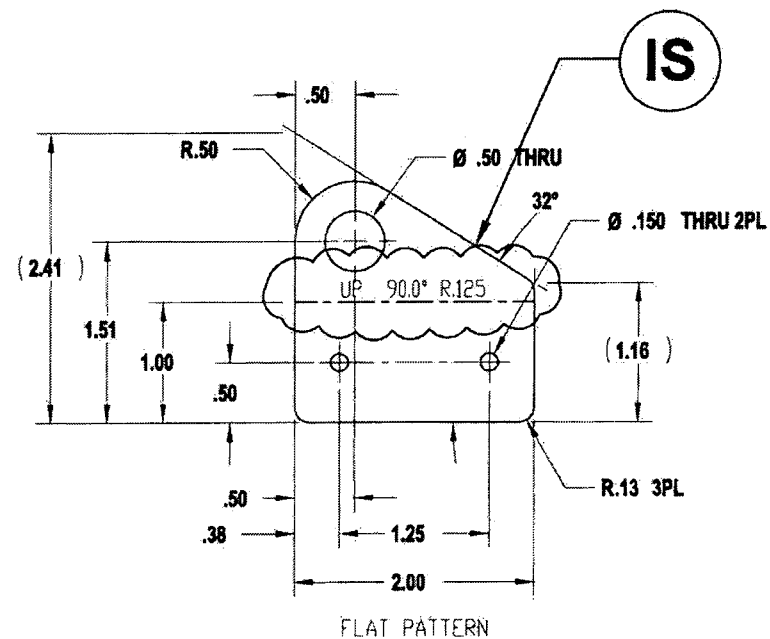
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL	SPECIFICATION
DOCUMENTS EFFECTED:					CHANGE CATEGORY	DER REVIEW REQUIRED
<input type="checkbox"/> RFMS <input type="checkbox"/> MDL <input type="checkbox"/> INSTALL INSTRU <input type="checkbox"/> ICA <input type="checkbox"/> BOM					<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO



SHEET 7, ZONE C4 IS:



SHEET 7, ZONE D1 IS:



SHEET 7, ZONE B7 IS:

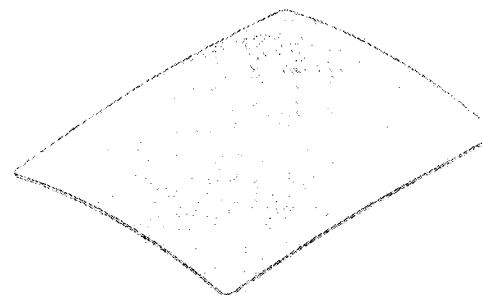
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED
A	UNINCORPORATED ECN(S)	01/05/04	REV 2

NOTES:

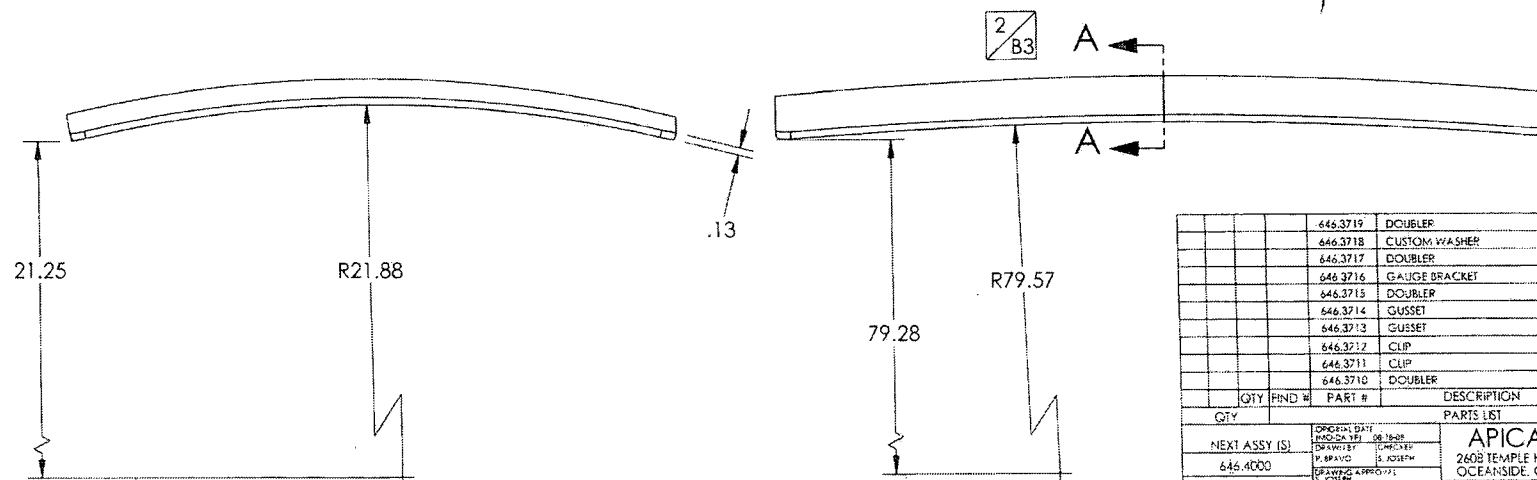
1. MATERIAL: ALUMINUM 6061-T6 PER AMS-QQ-A-250/11
2. FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK; CARDINAL 4860-50 PRETREATMENT PRIMER PRIME IAW MIL-P-23377J TYPE I CLASS N
3. MATERIAL: 17-4 PH AMS 5604, CONDITION H900
4. FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
5. DEBURR AND BREAK ALL SHARP EDGES
6. IDENTIFY IAW MPP-120



646.3710

UNINCORPORATED ECN(S)

03702



		646.3719	DOUBLER	△	△
		646.3718	CUSTOM WASHER	△	△
		646.3717	DOUBLER	△	△
		646.3716	GAUGE BRACKET	△	△
		646.3715	DOUBLER	△	△
		646.3714	GUSSET	△	△
		646.3713	GUSSET	△	△
		646.3712	CLIP	△	△
		646.3711	CLIP	△	△
		646.3710	DOUBLER	△	△
	QTY	FIND #	PART #	DESCRIPTION	MAT'L SPEC
QTY					
NEXT ASSY (S)			APICAL INDUSTRIES		
646.4000			2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300		
ORDER DATE 06-10-88 PO-DAVY ORDERED BY S. BRAVO S. JOSEPH DRAWING APPROVED BY COMMENTS:			SHEETMETAL		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 1) FRACTIONS .015 2) DECIMALS .005 3) ANGLES .015			SIZE C-48 CODE B DAWG NO. 07M16 SCALE NONE 646.3700		
			SHEET 1 OF 9		

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SECTION A-A



21.33

R21.94

R395.138

R.13 4PL

13.51

10.49

10.54

SECTION B-B

DATE: 08-15-08
DRAWN BY: P. BRAYO
CHECKED BY: J. JOSEPH
DRAWING APPROVAL
BY: J. JOSEPH
DATE: 08-15-08

APICAL INDUSTRIES
2608 TEMPLE HEIGHTS DR.
OCEANSIDE, CA. 92056-3512 (760) 724-5300

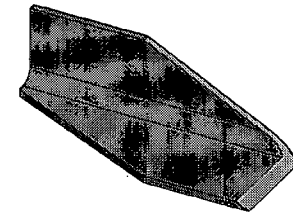
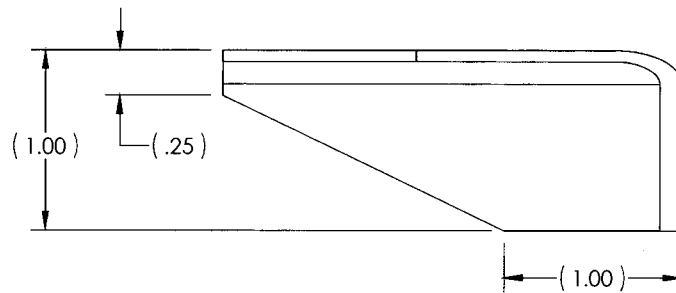
SHEETMETAL

UNLESS OTHERWISE SPECIFIED
DIMENSIONS ARE IN INCHES
TOLERANCES ARE:
1 PLACE DECIMALS ± .01
2 PLACE DECIMALS ± .005
ANGLES ± .5°

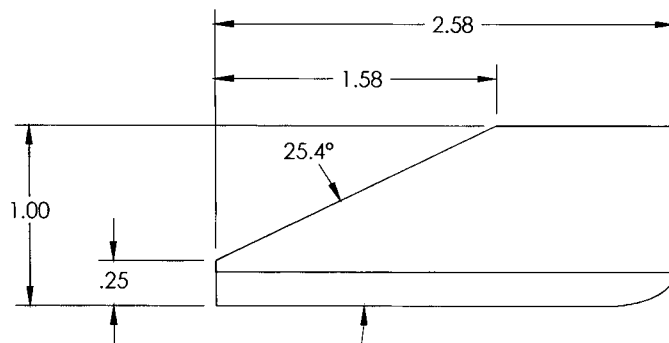
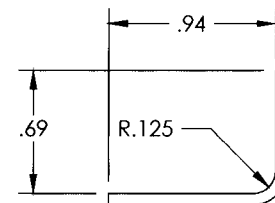
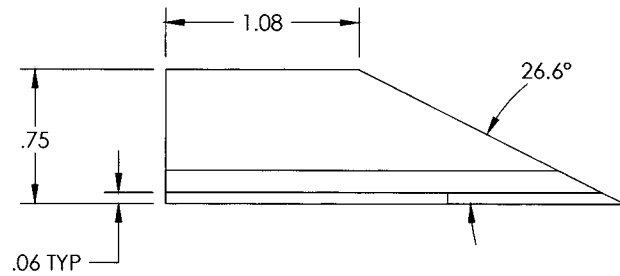
SIZE	CHG CODE	CHG NO.	REV
B	07M26	646.3700	A
SCALE: NONE			SHEET 2 OF 9

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REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



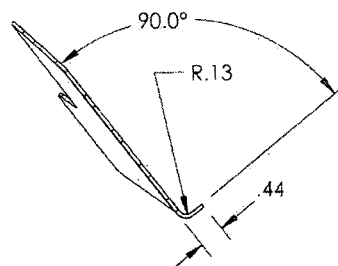
646.3711 SHOWN
646.3712 OPPOSITE



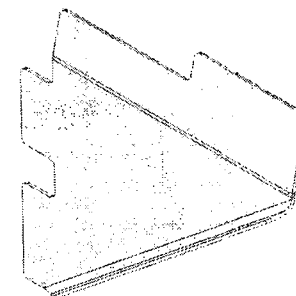
NEXT ASSY (S)	ORIGINAL DATE	08-18-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300 SHEETMETAL	
	DRAWN BY	CHECKED		
	P. BRAVO	S. JOSEPH		
	DRAWING APPROVAL			
	S. JOSEPH		SEE CAGE CODE DWG. NO. 646.3700 REV. A SCALE: NONE SHEET 3 OF 9	
	CONTRACT NO.			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: 2 PLACE DECIMALS ±.01 3 PLACE DECIMALS ±.005 ANGLES ±.5°				

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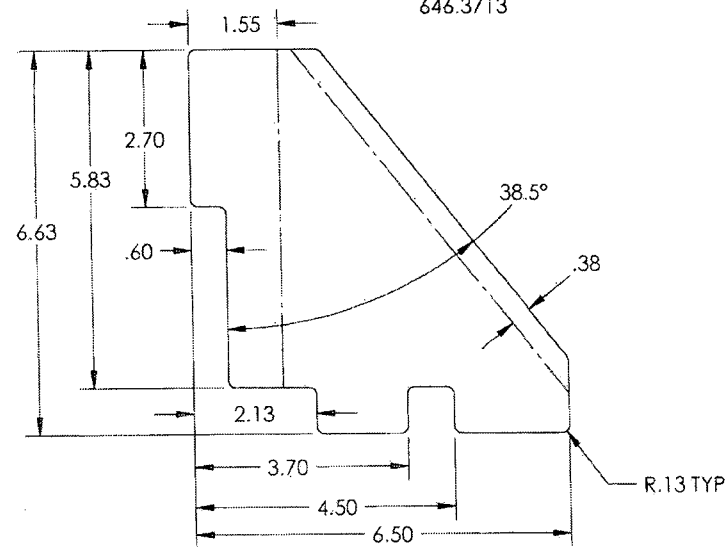
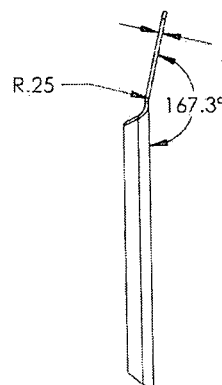
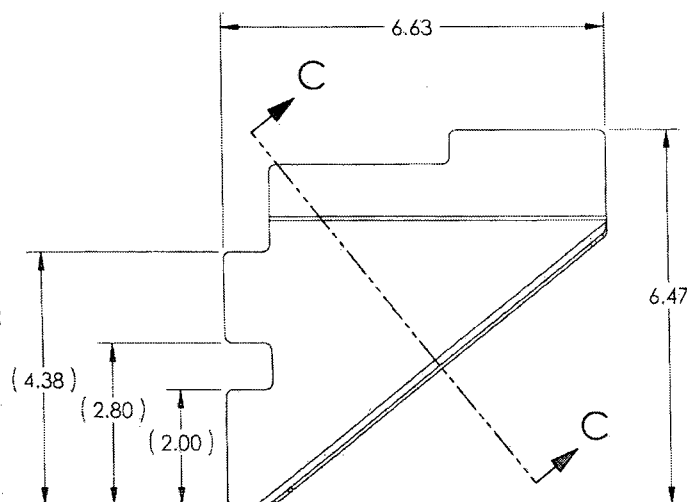
REVISIONS			
REV.	DESCRIPTION	DATE	APPROVED



SECTION C-C



646.3713

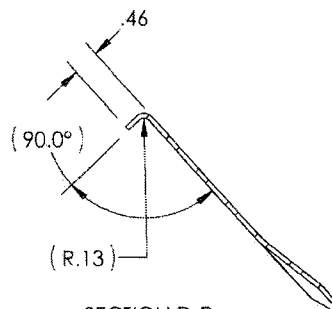
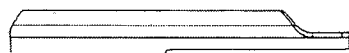


FLAT PATTERN

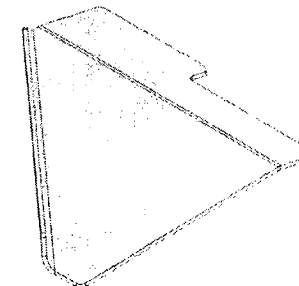
NEXT ASSY. IS	ORIGINAL DATE	CD-10-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300 SHEETMETAL		
	DRAWN BY	S. JOHNSON			
	DESIGNED BY	S. JOHNSON			
	CHECKED BY	S. JOHNSON			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE TO FINISH TOLERANCES ARE 3 PLACE DECIMALS ±.01 ANGLES ±.5°			SEE CADACORP DWS NO	646.3700	REV A
			B I 07MA26		
			SCALE: NONE	SHEET 4 OF 4	

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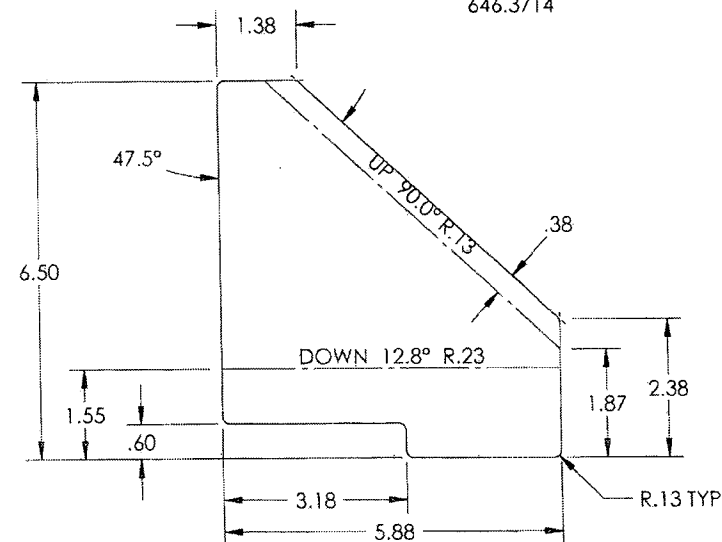
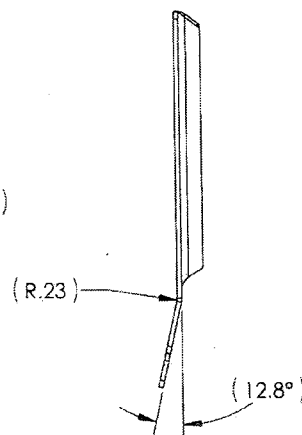
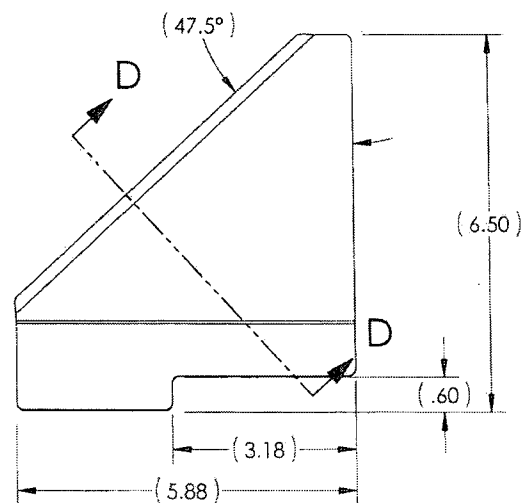
REV.	DESCRIPTION	DATE	APPROVED



SECTION D-D



646.3714

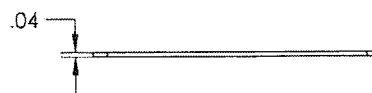
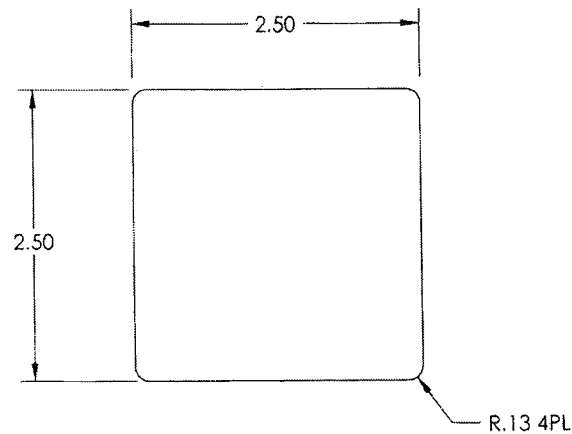


FLAT PATTERN

ORIGINAL DATE 12/25/75	BY J. BRAY	APICAL INDUSTRIES 2609 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760) 724-5300
DESIGNED BY J. BRAY	CHECKED BY J. BRAY	
DATE 12/25/75	APPROVED BY J. BRAY	
CONTRACT NO.		
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS ±.01 3 PLACE DECIMALS ±.001 ANGLES ±.5°	SHEET B	DWG NO. 646.3700
	SCALE NONE	SHEET 5 OF 9

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REVISION			
REV	DESCRIPTION	DATE	APPROVED

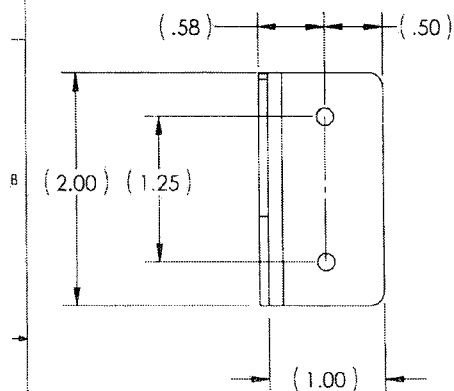


646.3715

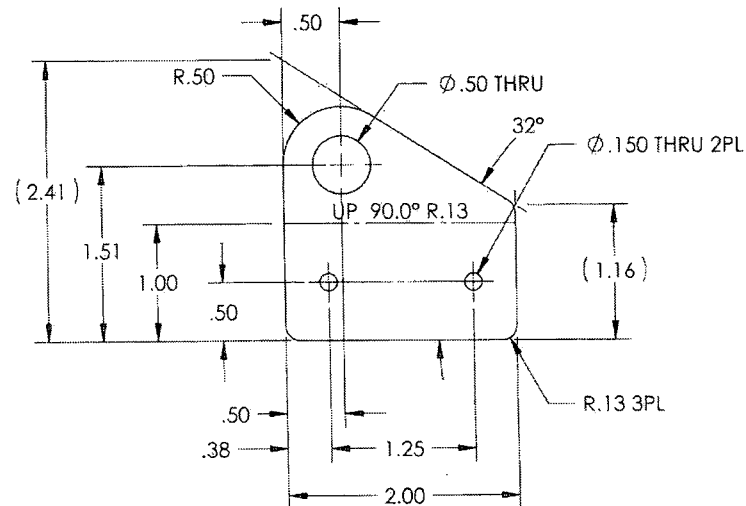
NEXT ASSY (S)		ORGANIZATION LSP-NO 101	08-18-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300			
DRAWN BY		CHECKED					
P. BRAY		S. JORDAN					
DRAWING APPROVAL		DATE					
				SHEETMETAL			
				UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE 3 PLACE DECIMALS 1.00 ANGLES 1/2°			
		SHEET CODE	DWG. NO.	REV			
		B	07M26	646.3700	A		
		SCALE: NONE		SHEET 6 OF 6			

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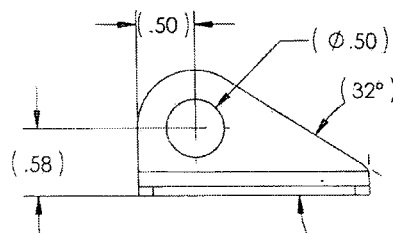
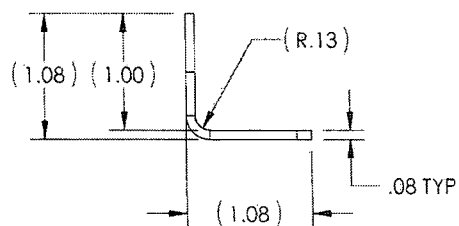
REV.	DESCRIPTION	DATE	APPROVED



646.3716



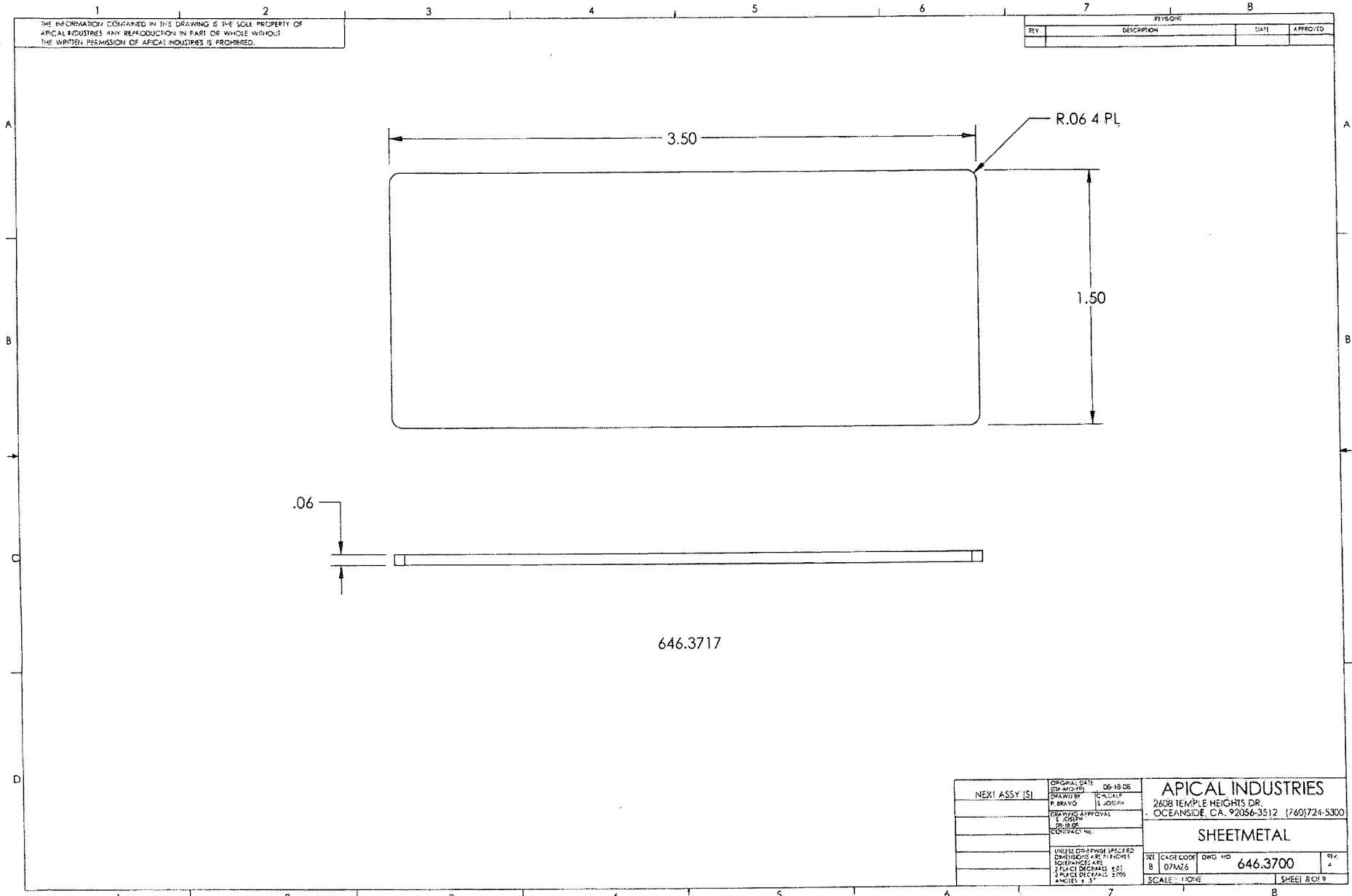
FLAT PATTERN



NEXT ASSY (S)	DRAWN BY: 08-15-08		APICAL INDUSTRIES	
	DRAWN BY: J. JOSEPH		2608 TEMPLE HEIGHTS DR.	
	DRAWING APPROVAL: J. JOSEPH		OCEANSIDE, CA. 92056-3512 (760)724-5300	
			SHEETMETAL	
	UNLESS OTHERWISE SPECIFIED		SIZE: 1/2" X 1/2" X 1/2"	REV: A
	TOLERANCES: .005		SCALE: 1/2" = 1"	SHEET 2 OF 2
		646.3700		

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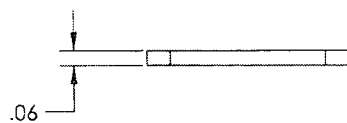
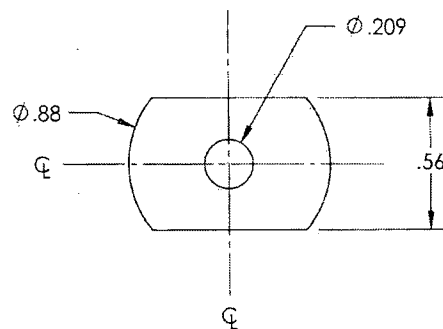
REVISION			
REV	DESCRIPTION	DATE	APPROVED



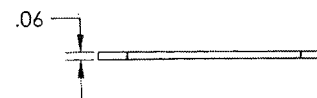
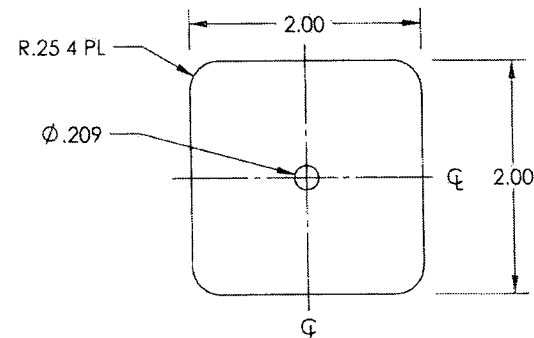
NEXT ASSY ISI	ORIGINAL DATE	05-18-08	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
	DRAWN BY	P. BRAYO		
	DESIGNED BY	J. JOSEPH		
	DESIGN APPROVAL	L. JOSEPH		
	CHECKED BY			
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS .01 ANGLES .5°			SHEET CODE	DWG. NO.
			B 07M26	646.3700
			SCALE: 1:100	SHEET 8 OF 9

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REVISION			
REV.	DESCRIPTION	DATE	APPROVED



646.3718



646.3719

NEXT ASSY IS	ORGANIZATION	DATE	APICAL INDUSTRIES	
	DESIGNED BY	CHECKED BY		
	DRAWING APPROVED BY	DATE	2608 TEMPLE HEIGHTS DR.	
	CONTRACTING	DATE	OCEANSIDE, CA. 92056-3512 17601724-5300	
UNLESS OTHERWISE SPECIFIED: TOLERANCES ARE: DIMENSIONS ARE IN INCHES FRACTIONS DECIMALS ANGLES	DWG. NO.	DWG. NO.	SHEETMETAL	
	B	07M26		
	SCALE	SCALE	646.3700	
	SCALE	SCALE	SHEET 9 OF 9	



A.T.G. Industries Inc.
731, rue Industrielle Rd.
PLATING DEPARTMENT
Rockland, On K4K 1T2
Canada
Ph: (613) 446-4544
Fax: (613) 446-4556

Pack List

Number: 63048

Date: 20-May-14

To

DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ship To


DART AEROSPACE LTD
1270 ABERDEEN ST.
HAWKESBURY, ON K6A 1K7
Canada

Ph: 613-632-5200

Fax: 613-632-1185

Ph: 613-632-5200

Fax: 613-632-1185

Terms		Ship Via	
Quantity	Description		
1 lot	Part: ASST 14 PCS 646.3713 (15.75) 4 PCS 646.3714 (15.75) 18 PCS 646.3715 (6.25) 13 PCS 646.3719 (6.25) 14 PCS 646.3717 (6.25) 6 PCS 646.3812 (6.10) HARD ANODIZE BLACK MIL-A-8625 TYPE II CLASS 2 MIL-P-23377J TYPE I CLASS N Job: 20140302	Rev:	PO: 24145 Line:
<p align="center">Certificate of Conformance</p> <p>A.T.G. Industries certifies that all items in this shipment are in conformance with all requirements, specifications and drawings referenced in the purchase order.</p> <p align="center">ISO 9001 : 2008 REGISTERED ATG SALES-2010 TERMS APPLY</p> <p>DATE : <u>20/5/14</u></p> <p>CERTIFIED SIGNATURE : <u></u></p> <p>RECEIVER SIGNATURE : _____</p>			